

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	7.D		2/2/99
O.I.P.E. CLASSIFIER	PW	34	2/5
FORMALITY REVIEW	OKS	7722	2-9

INDEX OF CLAIMS

<input checked="" type="checkbox"/>	Rejected	N	Non-elected
<input type="checkbox"/>	Allowed	I	Interference
<input type="checkbox"/>	(Through numeral)	Canceled	Appeal
<input type="checkbox"/>		Restricted	Objected

Claim	Data
Final	
Original	
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Claim	Date
Final Original	
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If more than 150 claims or 10 actions
staple additional sheet here

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